

SCHEDULE B, Certification of Insurance or Self-Insurance

NAME OF LOCAL AGENCY: City of Morro Bay

The County and its officers, agents, employees, and servants are included as additional insureds for the purposes of this Agreement. The County shall receive thirty-days' (30-days') prior written notice of any cancellation or change to the policy at the addresses listed in this Agreement. For each type of insurance listed below, Morro Bay must either: 1) complete the certification below, or 2) provide certificates of insurance.

**SELF-INSURANCE CERTIFICATION BY MORRO BAY FOR
TORT LIABILITY**

This is to certify MORRO BAY has elected to be self-insured.

By:

Signature Dana Swanson
Printed Name Dana Swanson

Date 7/15/15
Title City Clerk

**SELF-INSURANCE CERTIFICATION BY MORRO BAY FOR
WORKER'S COMPENSATION BENEFITS**

This is to certify MORRO BAY has elected to be self-insured for Workers' Compensation benefits which comply with Labor Code Section 3700.

By:

Signature Dana Swanson
Printed Name Dana Swanson

Date 7/15/15
Title City Clerk

**SELF-INSURANCE CERTIFICATION BY MORRO BAY FOR
LOCAL AGENCY-OWNED VEHICLES**

This is to certify MORRO BAY has elected to be self-insured for MORRO BAY owned vehicles.

By:

Signature Dana Swanson
Printed Name Dana Swanson Title City Clerk

Date 7/15/15